

## CHP Corner



### AMERICAN ACADEMY OF HEALTH PHYSICS

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## A Summary of the AAHP Special Session

*Kent Lambert, CHP, AAHP Past President*

The American Academy of Health Physics (AAHP) held a special session during the 2017 Health Physics Society (HPS) Annual Meeting. The session—titled “What Every CHP Should Know About . . .”—consisted of eight technical presentations.

The morning started with Linnea Wahl’s presentation on technical writing. Linnea was a technical writer before becoming a certified health physicist (CHP) and currently serves the HPS as a technical writer and editor for Web Operations. Linnea emphasized that good writers understand their audience(s), write with a purpose in mind, use organizational tools such as outlines, choose the right words, and write clear sentences and logical paragraphs. She made it very clear that plagiarizing is unacceptable; therefore, let it be known that some of the content of this paragraph was taken from her materials (I let Linnea read this article before publication and she gave it a C+, which means that my writing has improved since her talk!).

Phillip Jenkins talked about devices and methods to measure radon. Phil is the president of the American Association of Radon Scientists and Technologists (AARST), and his contributions to the field of radioactive air monitoring and radon measurements have been recognized with awards from AARST and the Air Monitoring Users Group. In his presentation, Phil described the three categories of passive monitors (charcoal adsorption, track etch, and electret ion chambers) and the three categories of active monitors (scintillation cells, ion chambers, and solid-state detectors). For each category, he described how the monitors are best used and their limitations.

Once radon measurements are made, mitigation may be necessary. This was Shawn Price’s topic. While working at the Environmental Protection Agency, Shawn helped to develop the National Radon Proficiency Program and continues to serve on its Policy Advisory Board. Shawn preceded Phil Jenkins as president of AARST. Shawn described the ways radon enters buildings and active soil depressurization as the most common mitigation technique. He also described methods which can be used during new construction to prevent radon intrusion.

After the coffee break, the audience returned (to my great relief!) to hear Sean Austin talk about transportation of radioactive materials. Sean specializes in shipping radioactive materials in accordance with Department of Transportation and International Air Transport Association regulations and is a much sought-after consultant and trainer on the matter. Sean’s presentation focused on the rationale behind the regulatory requirements and described the information needed to make the proper choices in packaging. He discussed the standard radiation protection practices (distance, shielding, containment, contamination control, emergency response, etc.) that are elemental in the transportation of radioactive materials. And he described how the various markings, labels, and placards are designed to communicate the hazards to those handling the package.

David Connolly was next, talking about our federal government. After practicing law in Washington, DC, representing health and pension plans governed by the Employee Retirement Income Security Act, David joined the staff of the House of Representatives for two terms. He currently represents the HPS with Congress, the White House, and executive agencies on issues germane to the HPS. In his presentation, David described how bills get written and passed, how the branches of the federal government function and interact, and how regulations get enacted. He ended his presentation

with a reminder that it is our federal government, and to make it work the way it should, we need to be engaged and involved.

When the audience returned from the AAHP Awards Luncheon, Nick Dainiak, MD, presented what every CHP should know about medical management of large, acute doses. Nick is the medical and technical director of the Radiation Emergency Assistance Center and Training Site (REAC/TS). In his presentation, Nick discussed how a radiological or nuclear event that results in serious traumatic injuries and large acute radiation doses will also drastically disrupt the normal operations of health care facilities. He explained that this includes changes in hospital leadership with the implementation of an incident command system, emphasis on protecting hospital staff from contamination, and providing advice to government officials and the public. Nick suggested that health care providers will expect CHPs to provide expert information on risk (not dose) and managing contamination. Nick described medical management of patients using antibiotics, cytokines, supportive care, and topical therapy. He added that the information that a health physicist gives to clinicians guides the selection of therapies and results in an increase in the dose necessary to kill 50% of the exposed population in 60 days (LD50/60) and thus in lives saved.

Nick's talk segued nicely into one by Bill Rhodes on securing radioactive sources. Bill is a senior manager for the Global Security Program at Sandia National Laboratories and has extensive experience in emergency assessment and response and in engineered physical security. Bill defined radiological dispersal devices (RDDs) and explained that the risk of an RDD attack is the combination of the probability of an attack and the consequences of it. He reminded us that threats can be external (e.g., criminals and terrorists) or internal (e.g., a disgruntled employee). Bill described the elements of a balanced physical security system: detection, delay, and response.

The special session ended with John Frazier giving advice on what to expect and how to respond if called upon to testify as an expert witness. John is a distinguished emeritus member of the National Council on Radiation Protection and Measurements, past president of the HPS, and past president of the AAHP. He has testified under oath more than 100 times either in deposition or at trial as an expert witness in state and federal courts. John suggested that it is important to prepare by reviewing the complaint and all relevant documents and data, develop preliminary opinions, and discuss these with the attorneys. John indicated that preparations should also include determining the main issues of the case, your primary and secondary messages, and sound bites you want to use. John emphasized that the role of the expert witness is to teach: teach the attorneys before trial and teach the judge and/or the jury during trial.

All talks were well attended. Thank you Linnea, Phil, Shawn, Sean, David, Nick, Bill, and John!

## Activities of the Exam Site Committee

*Sean Murphy, CHP, Committee Chair*

The Exam Site Committee is a small group of certified health physicists (CHPs) tasked with finding adequate space to give the American Board of Health Physics (ABHP) exam and finding willing proctors to administer the exam at those exam sites. The process starts with choosing locations for an exam and then contacting prospective building hosts, securing the space, and staffing the site with sufficient CHPs to ensure the exam is conducted in a fair fashion.

For the 2017 exam-site selection, the committee members were Adel Baryoun (Maryland), Jeff Bruner (Tennessee), and Brad Serfas (Missouri), and our alternate member was William Uhland (Washington State).

The locations for the 2017 examination were:

Whitby, Ontario  
(Toronto, Canada, area)  
New York, New York  
(Manhattan)

Waltham, Massachusetts  
(Boston metro area)  
Gaithersburg, Maryland  
(DC area)

St. Louis, Missouri  
 Lincoln, Nebraska  
 (University of Nebraska, Omaha)  
 Albuquerque, New Mexico  
 Fort Collins, Colorado  
 Oak Ridge, Tennessee  
 Houston, Texas  
 New Haven, Connecticut

Los Angeles, California  
 San Ramon, California  
 Pocatello, Idaho  
 Richland, Washington  
 Fort Dix, New Jersey  
 Vienna, Austria  
 Red Wing, Minnesota

The proctors are on the front lines; they are the face and voice of the ABHP. They give up a day to sit in an exam room and watch the candidates take the test. They secure the room, set up the space, receive the exams, mail the completed exams, and ensure that the examinees have every opportunity to succeed. The ABHP and the Exam Site Committee owe a debt of gratitude to all proctors for your dedication and hard work. Thank you!

## ABHP Exam Application Reminder



The time is NOW! Applications to take either part of the 2018 American Board of Health Physics (ABHP) examination must be filed with the Secretariat and postmarked **no later than 16 January 2018**.

Application information may be found [here](#).

## Standard Operating Procedures

*Jim Stafford, CHP, AAHP Parliamentarian*

The standard operating procedures (SOPs) of the American Academy of Health Physics (AAHP) are reviewed periodically. Changes are proposed and approved during meetings of the AAHP Executive Committee. There are 50 SOPs that guide the operations of the AAHP, and over the past year several have been revised to reflect policy changes.

The revised procedures are available in the Members Only section of the [AAHP website](#) (your AAHP user ID and password will be needed to access this area of the website).

## Highlights of the Finances of the AAHP

*Scott Schwahn, CHP, AAHP Treasurer*

*Editor's note: the following key items were taken from the routine treasurer's report to the American Academy of Health Physics (AAHP), dated 9 July 2017.*

The AAHP continues to have a very healthy total balance among all accounts.

In accordance with AAHP Standard Operating Procedure 2.4.2, the fair market value of the Academy's long-term investment reserves shall be maintained "at least 150% of the annual operating budget . . ." The long-term investment account is approximately 300% of the operating budgets and therefore is compliant.

The operating budget approved in 2016 was \$247,910, with a conservative estimated deficit of \$70,410. As of 31 May 2017 (end of the third quarter of the fiscal year), the AAHP had deficit spending of \$38,421, which is less than the \$52,808 deficit projected for this same time period. Taking into account estimated growth of investments, the AAHP total account balance will increase approximately \$12,000 for this fiscal year.

The operating budget prepared by the Finance Committee in May 2017 is \$243,780, at a conservative estimated deficit of \$42,480. It should be noted that deficit budgets have typically resulted in a net positive income despite the budget, due to investment income.